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Bib Data Sheet

CONFIRMATION NO. 1567

<b>SERIAL NUMBER</b> 09/989,427	<b>FILING DATE</b> 11/21/2001 <b>RULE</b>	<b>CLASS</b> 359	<b>GROUP ART UNIT</b> 2873	<b>ATTORNEY DOCKET NO.</b> GGI0038-US
<b>APPLICANTS</b> Chii-Wann Lin, Taipei, TAIWAN; Hsin-Chih Lin, Banchiau City, TAIWAN; Tzu-Chien Hsiao, Taipei, TAIWAN;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 12/14/2001</b>				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> TAIWAN	<b>SHEETS DRAWING</b> 19	<b>TOTAL CLAIMS</b> 21
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> Michael D. Bednarek SHAWPITTMAN 2300 N Street, N.W. Washington, DC 20037				
<b>TITLE</b> Digital amblyopia image aid system provided with individually adjustable function				
<b>FILING FEE RECEIVED</b> 379	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	